								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD								09/944/544					
Effective October 1, 2000										915	Ø	->0	100
CLAIMS AS FILED - PART I (Column 1) (Column 2)									EN		OR	OTHER SMALL E	THAN
TOTAL CLAIMS			20					RAT	Ε	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	ASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		· Ø			X\$ 9=			OR	X\$18=	d
INDEPENDENT CLAIMS			4 minu	is 3 =	' \			X40=			OR	X80=	80
MUL	TIPLE DEPEN	DENT CLAIM PI	RESENT				+135=				OR	+270=	
·Ht	he difference	in column 1 is	ess than zero, enter "0" in column 2					TOTAL		OR	TOTAL	790	
CLAIMS AS AMENDED - PART II												OTHER	
8	11"	(Column 1)	•		mn 2) HEST	(Column 3)		SMA	u	ADDI-	OR I I	SMALL	ADDI-
IT A	j	REMAINING AFTER		NUA PREV	MBER IOUSLY FOR	PRESENT EXTRA		RAT	Ε	TIONAL		RATE	TIONAL FEE
AMENDMENT	Total	· 34	Minus	<i>y</i>	ef	= 4	1	X\$ 9	)=		OR	X\$18=	
NE N	Independent	. 4	Minus	•••	4_	-0		X40	=		OR	X80=	
V	FIRST PRESE	NTATION OF M	ULTIPLE DEPE	NDEN	IT CLAIM		J	+13			OR	+270=	
									YAL	-	1	TOTAL	
12-29-05 (Column 1) (Column 2) (Column 3)								ADDIT. FEE				ADDIT. FEE	
	1740	- (Column 1) CLAIMS	·		umn 2) SHEST	(Column 3	<b>ካ</b>			ADDI-	1		ADDI-
N B F		REMAINING AFTER AMENDMENT		PRE	MBER MOUSLY D FOR	PRESENT EXTRA		RA	re .	TIONAL		RATE	TIONAL FEE
AMENDMENT	Total	.26	Minus .	• 3	4,	= Ø		X\$	9=		OR		
ME	Independent	. 10	Minus	2017	7	1-6	4	X4	0=		OR	<b>X89</b> =	1200
Ľ	FIRST PRESE	NTATION OF N	IULTIPLE DEP	ENDE	NT CLAIN		Ļ	+13	5=		OR	+270=	
								ADDIT	OTAL		]OR	ADDIT. FE	
		(Column 1)		(Co	lumn 2)	(Column	<u>3)</u> _						
	•	CLAIMS		HI	GHESY JMBER	PRESENT	7			ADDI-	7		ADDI-
AMENDMENT C		REMAINING AFTER AMENOMENT		PRE	VIOUSLY ID FOR	EXTRA		RA	TE	TIONAL FEE	1	RATE	TIONAL FEE
	Total	•	Minus	••		=		X\$	9=		OF	X\$18=	
	Independent	·	Minus	•••		]=	4	X4	0=		OF	X80=	
	FIRST PRES	ENTATION OF	MULTIPLE DEF	PENDE	NT CLAI	M			35=	1	OF	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OTA		┩`	TOTA	AL -
I	If the "Highest N	umber Previously	Paid For IN THI	S SPAC	E is less t	han 20, enter 1		ADDI	r. FE	EL	OF	AUDIT. PE	E
	The Highest No	mber Previously	Paid For (Total o	indep	endent) is t	he highest nu	mber	lound in	the a	appropriate	box in	column 1.	